DEC 2 9 2003

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Armer J. WILLENBRING

Serial No: 09/777,750

Confirmation No.: 4253

Filed: February 6, 2001

For: BULK VESSEL FEEDER

Art Unit: 1743

Examiner: Brian R. Gordon

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:
Mail Stop NON-FEE AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
  December 23, 2003
  Date of Deposit
  Barry M. Shuman, Reg. No. 50,220
  Name
Barry M Shuman 12/23/2003
Signature   Date

AMENDMENT

Mail Stop NON-FEE AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated September 25, 2003, please amend the above-referenced application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 12 of this paper.

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JAN 0

TC 17

\\\LA - 81841/0045 - 189135 v1

FORM PTO-1083   1888-174 (81841.0045)

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> December 23, 2003
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> Barry M. Shuman, Reg. No. 50,220
> Name
> *signature* 12/23/2003
> Signature   Date

Mail Stop NON-FEE AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒   No additional fee is required.
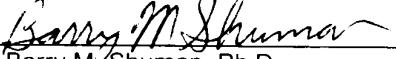
The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR		(Col. 3) PRESENT EXTRA*	LG/SM $ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	34	-	35	**		LG=$18 SM=$9 $	$
INDEPENDENT CLAIMS FEE	3	-	3	***		LG=$86 SM=$43 $	$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = $290 SMALL ENTITY FEE = $145		$
						TOTAL	$

*   If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
**   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
***   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

☐   A check in the amount of $___ to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**

☐   A check in the amount of $___ to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**

☒   The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**

     ☒   Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
     ☒   Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,

HOGAN & HARTSON L.L.P.

By: *signature*
Barry M. Shuman, Ph.D.
Registration No. 50,220

Dated: December 23, 2003

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